payment has since been normalised; if not, what are the reasons therefor;

(b) whether new contracts in this regard have since been given from the current financial year (April, 1989), if r.ot, what are the reasons therefor; and

(c) whether Government have taken . any action against those contractors who did not supply ration last year according to the terms and conditions laid down by Government?

THE MINISTER OF STATE IN THE DEPARTMENT OP DEFENCE PRODUCTION AND SUPPLIES IN THE MINISTRY OF DEFENCE (SHRl CHINTAMANI PANIGRAHI): (a) Yes, Sir. However, rice is being issued on restricted basis due to stock position.

(b) Contracts for supply of fresh items to DID, New Delhi for the year 1989-90. have been concluded. The contracts for various-dry items are concluded from time to time during the flush seasons.

{c) Risk purchase action has been invoked against defaulting contractors, as per laid down conditions.

Setting up of a VCR/VCP manufacturing Unit In Orissa

656. SHRI BAIKUNTHA NATH SAHU: Will the PRIME MINISTER be pleased to state:

(a) whether Government propose, to set up a VCR/VCP manufacturing unit in Orissa;

(b) whether tbe Orissa Governmeni have sent any proposal to the Department of Electronics i_n that regard;

(c). whether the project is pending for Government's clearance; and

(d) if so, the steps taken to give clearance to the proposal?

THE MINISTER OF STATE IN THE MINISRY OF SCIENCE AND TECHNOLOGY AND THE MINISTER OF STATE IN THE DEPARTMENTS OI" OCEAN DEVELOPMENT, ATOMIC ENERGY, ELECTRONICS, AND SPACE (SHRI K. R NARAYANAN):

(a) and (b) Government of Orissa has requested that the proposed project of M/s. Electronics Trade and Technology Development Corporation Ltd. (ET&T) be located at Bhubaneswar, ET&T is yet to complete its locational study.

(c) and (d) ET&T's revised application for manufacture of VCRs/VCP* is under consideration of the Government,

Marketing of Medicines based on Nandrolone Phenylpropionate etc

057. SHRI.M. KADHARSHA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether medicines based on Nandrolone ph.enylproprionate, Nandrolone Decanoate, Ethyl Estranol and Testosterone propionate are being marketed in the country;

(b) whether it is a fact that thee* drugs have very adverse effects;

(c) if so, the details thereof;

(d) whether it is also a fact that me precautionary note is being made available either to the consumers! or te medical profession;

Ce) if so, what steps have been to ken in this regard;

(.f) what are the indications and contraindications of these drugs; and

(g) what, were the imports of thes* drugs during the last three years, yearwise; "and what was the CIF value of imports each year of each drug?

THE MINISTER OF STATE IN TH! MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) Yes, Si?.

(b) and M The reported adverse affecta of these drugs are increase tt

Nitrogen retention and skeletal weight, sodium and water retention oedema, increased vascularity of the skin hypercalcaemia, increased growth of the bones-

(d) to (f) The indications for these drugs and the precautions to be observed while prescribing anabolic steroids and the contra-indications given in thg package insert are at Annexure-I. given in the statement—I (See below).

(g) Details of imports of these drugs such as quantity and C.I.F, prices are given in the Statement II

Statement I

Prtcautions

1. Anabolic Steroids should bs administered only *in* the form of i Uermittant regimen not exceeding three months at a time. If no beneficial effect is observed during this period, the drug should be discontinued. The interval between two courses of treatment should not be less than 3 months.
2. While using Anabolic Steroids in the pre-pubertal age group, there should be very close monitoring and supervisions by means of parameters like bonsage, developme'.t of se ondary sex characteristics and growth velocity chart. If there is evidence of opiphyseal maturation, at any stage, as shown by follow-up X-ray, the treatment with Anabolic Steriods should be discontinued forthwith!
3. The use of Anabolic Steroids in atheletes doss not improve the work performance of the atheletes.
4. The Anabolic Steroids should not be given as foo ' substitutes under any circumstances. These drugs exert their optimal effect only when adequate protein and calorie intake in the patients is ensured and not otherwise.

Contra-indications: _____

1. Prostatic carcinoma
2. Pregnancy
3. Breast carcinoma in males
4. Liver disfurnction
5. Congestive cardiac failures

Indications:

1. Refractory.and aplastic anaemia
2. Chronic renal failure
3. Osteoporasis specially that associated with the use of glucocorticoid hortnoes and fractures.
4. Selected cases of pre-pubertal growth retardation when adequate calories have been replenished and patient can be monitored adequately vis-a-vis bone age, virilization and lipid ehanges.

Statement-II

Year 1985-86		Year 1986-87		Year 1987-88	
Qty. in kg.	Value	Qty. in kg.	Value	Qty. in kg.	Value
		** Nandrolone PhenylprOpionate*			
164	1292895	178	1516438	33-5	282383
		Nandrolone Deeanoate			
.10	97459	145	174583	15-8	199321
		NIL			
		Testosterone Propionate			
31	321352	171-2	1959242	15	134432